

# Application for Service/Permit

## For Customer Service Use Only

Account Number		Meter Number	
Cycle		Meter Size	
Route		Permit Processor	
Permit Number		Map and Parcel	

*Please photocopy this form for repeated use.*

**THE METROPOLITAN GOVERNMENT OF NASHVILLE AND DAVIDSON COUNTY  
METRO WATER SERVICES  
CUSTOMER SERVICE CENTER**

**PLEASE PRINT FILL IN ALL BLANKS**

Owner Name: \_\_\_\_\_  
Last, First, Middle

TelephoneNumber:(H)\_\_\_\_\_(O)\_\_\_\_\_

Service Address: \_\_\_\_\_

Number Street

City State Zip Code

Lot No. Residential Commercial

New Split Connection Discontinued

( ) Right ( ) Left ( ) Corner

Mailing Address: \_\_\_\_\_

Number Street

City State Zip Code

PlumbingCompanyName:\_\_\_\_\_ Plumber'sPhoneNo.:\_\_\_\_\_

Plumber's Name (PRINT) Plumber's Signature License No: Date

*\*Meters will be inspected ten working days after permit is issued. Additional inspections may result in cost of service fees.*